Tenant Based Rental Assistance Set Up Form HOME Program

Check the appropriate box:		Name and Phone Number of Perso	n Completing Form:
Original Submission Change Owner's Address Ownership Transfer Revision			
Ownership Transfer Revision			
A. General and Activity Information.			
Name of Participant:	2. County Code	IDIS Activity ID Number	4. Activity Name

B. Household Characteristics. (Refer to code below where applicable.) Assisting more than 8 tenants? See continuation page.

				Monthly Rent			Household					Tenant Contract			
													Paid to?	Newly Assisted	
No.	Last Name	# of		Tenant		TBRA	Total		Hispanic?				O=Owner	Tenant?	# of Months
		Bedrooms	Security Deposit	(a)		(b)	(a + b)	% Med	Y/N	Race	Size	Type	T=Tenant	Y/N	in Contract
1			\$ -	\$ -	\$	-	\$ -								
2			\$ -	\$ -	\$	-	\$								
3			\$ -	\$ -	\$	-	\$								
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8			\$ -	\$ -	\$	-	\$ -								

C. Total/Subtotal of HOME Funds Requested:

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D. Number of TBRA units <u>designated</u> for the homeless*:
Of those, number <u>designated</u> for the chronically homeless**:

of Bedrooms

- 0 SRO / Efficiency
- 1 1 bedroom
- 2 2 bedrooms
- 3 3 bedrooms
- 4 4 bedrooms
- 5 5 or more bedrooms

Occupant

- 1 Tenant
- 2 Owner
- 9 Vacant Unit

Household % of Med

- 1 0 to 30%
- **2** 30+ to 50%
- 3 50+ to 60%
- 4 60+ to 80%

Household Race

- **11** White
- 12 Black or African American
- 13 Asian
- 14 American Indian or Alaska Native
- 15 Native Hawaiian or Other Pacific Islander
- 16 American Indian or Alaska Native & White
- 17 Asian & White
- 18 Black or African American & White
- 19 American Indian or Alaska Native & Black or African American
- 20 Other Multi Racial

Household Type

- 1 Single, non-elderly
- 2 Elderly
- 3 Single Parent
- 4 Two Parents
- 5 Other

Definitions:

- * The HUD definition of homeless is: (1) An individual or family who lacks a fixed, regular and adequate nighttime residence; or (2) An individual or family who has a primary nighttime residence that is:
 - (a) a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill);
 - (b) an institution that provides a temporary residence for individuals intended to be institutionalized; or
 - (c) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.
- **The HUD definition of a <u>chronically homeless person</u> is an unaccompanied homeless individual with a disabling condition who has either: (1) been continuously homeless for a year or more; or (2) has had at least four episodes of homelessness in the past three years. A <u>disabling condition</u> is defined as a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability. <u>For chronic homelessness</u>, the definition of a homeless person is an unaccompanied individual sleeping in a place not meant for human habitation or in an emergency homeless shelter.

Continuation Page (make copies as needed)

		•		Monthly Rent		Household				Tenant Contract				
No.	Last Name	# of Bedrooms	Security Deposit	Tenant (a)	TBRA (b)	Total (a + b)	% Med	Hispanic?	Race	Size	Туре	Paid to? O=Owner T=Tenant	Newly Assisted	# of Months
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C. Subtotal of HOME Funds Requested:

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